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FOREWORD

Notable progress was made in the population field during 1990. There is now unprecedented recognition by countries throughout the world about the important role that population variables -- be it in terms of growth, distribution, migration, age structures or urbanization -- play in all aspects of socio-economic development.

Among the many positive achievements of the past year was the adoption by the General Assembly on 21 December 1990 of a major resolution on population and development (45/216). The resolution, among many other things, encouraged UNFPA to sustain the momentum generated by the International Forum on Population in the Twenty-first Century through the continued follow-up to the recommendations contained in the Amsterdam Declaration and emphasized the importance of mobilizing and increasing resources for population activities. It also stressed the importance of addressing the relationship between demographic pressures and unsustainable consumption patterns and environmental degradation during the preparatory process for the United Nations Conference on Environment and Development.

There were a number of other equally important statements during the year stressing the urgency of achieving a better balance between population, resources, environment and development. The Declaration of the Special Session of the General Assembly on International Co-operation, for example, concluded that "population policies and other social services are a key to both improving individual welfare and successful development". The International Development Strategy (IDS) for the 1990s also made it clear that a lowering of the rate of population growth "will relieve strains on the social situation, economic growth, the environment and the use of natural resources." And the Programme of Action of the Second United Nations Conference on the Least Developed Countries, held in Paris in September, refers to population growth as a fundamental problem that must be addressed in order to alleviate poverty, help save the environment and address specific concerns of women and children.

At the national level, countries are moving steadily forward, addressing their population problems through increasingly comprehensive and multi-sectoral population programmes. They are also making advances in formulating and implementing population policies that are well integrated into overall development planning. Such progress notwithstanding, the needs for assistance are great and growing, as the global community endeavours to achieve the goals agreed to at the historic International Forum on Population in the Twenty-first Century, held in Amsterdam in November 1989. The Amsterdam Declaration -- convinced that unless effective action is taken immediately, future resources will be woefully inadequate -- calls for a doubling of assistance from all sources for population programmes from the present modest level of \$4.5 billion to at least \$9 billion by the year 2000.

One of the top priorities for UNFPA in 1990, and indeed for the entire decade of the 1990s, is the mobilization of resources in support of population activities, particularly in the most affected and poorest countries. UNFPA is heartened by the many expressions of support for population activities, most notably General Assembly resolution 45/216 and the policy statement for the 1990s issued by the Development Assistance Committee (DAC) of the Organization for Economic Cooperation and Development (OECD), which explicitly states that DAC members are ready to help developing countries fund and implement effective population strategies as a matter of priority.

The need for decisive action in the population field has never been greater than it is today. Total world population is nearing 5.4 billion and is increasing at an unprecedented pace. By the year 2001, it will be 6.4 billion. Over 90 per cent of this growth is taking place in developing countries. We have the goals of the Amsterdam Declaration and over 20 years of operational experience in the population field to guide us. We must and we can make these goals a reality. Working together with all countries, with concerned non-governmental organizations, and with all our partners in the United Nations system, we can stabilize population growth, secure a safer world for our mothers and children and realize the vision of sustainable development throughout the world.

Nafis Sadik
Executive Director

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II. UNFPA IN 1990:

PROGRAMME AND FINANCIAL HIGHLIGHTS

Pledges and contributions

- Income in 1990 (provisional) totalled \$212.4 million, compared to 1989 income of \$185.2 million, an increase of 14.7 per cent compared to 1989.
- Pledges to UNFPA's general resources in 1990 totalled \$205.8 million, \$25.1 million more than 1989, a percentage increase of 13.9 per cent. At year's end, cumulative pledges through 1990 totalled \$2.2 billion from a cumulative total of 158 donors.
- The number of donors in 1990 totalled 106. There were six first-time donors in 1990 (Chad, German Democratic Republic*, Niue, Palau, Tokelau and Tuvalu).
- The Fund's ongoing efforts to seek additional resources for population projects and programmes through multi-bilateral and other arrangements generated an additional \$10.5 million during 1990 for projects with allocations totalling \$27.1 million at year-end (see part III).

Allocations and expenditures

- Total revised programmable resources for 1990 were \$165.8 million, as endorsed by the Governing Council in decision 90/35 B, paragraph 1, compared to \$177.2 million for 1989.
- Project allocations in 1990 totalled \$210.9 million, including \$36.8 million of unspent allocations from 1989. Project allocations in 1989 totalled \$194.2 million, including \$39.2 million of unspent allocations from 1988. Project expenditures (provisional) for 1990 totalled \$168.9 million compared to project expenditures in 1989 of \$157.4 million.
- Expenditures (provisional) in 1990 totalled \$221.3 million, compared to \$203.6 million in 1989. The 1990 figure includes \$119.2 million for country programmes, compared to \$109.4 million in 1989; \$49.7 million for intercountry (regional and interregional) programmes, compared to \$48.1 million for 1989. Total administrative and programme support services (APSS) expenditures for both headquarters and field offices were \$37.8 million in 1990 (net of \$2.6 million overhead credits), compared to \$32.1 million in 1989 (net of \$2.2 million overhead credits). Field office costs were \$15.6 million in 1990 compared to \$11.6 million in 1989. Agency support costs were \$14.7 million in 1990, compared to \$14.0 million in 1989. Agency support costs, both in 1989 and 1990, in addition to including all overhead payments to United Nations executing agencies, also included support costs paid to non-governmental organizations and support costs paid to UNFPA for charges assessed to Government-executed projects and for procurement services to government projects.
- The project expenditure rate (expenditures divided by allocations) was provisionally 80.1 per cent, compared to 81.1 per cent (final) in 1989. The resource utilization rate (expenditures divided by programmable resources, as approved by the Governing Council in decision 89/46 B) was provisionally 101.9 per cent in 1990 compared to 88.9 per cent in 1989.
- 499 new projects were approved in 1990, amounting to \$45.6 million, compared to 501 new projects in 1989 amounting to \$51.0 million.
- At year's end, UNFPA was assisting 3790 projects: 2773 country and 1017 regional and intercountry projects (1291 country and regional projects in Africa; 959 in Asia and the Pacific; 592 in Latin America and the Caribbean; and 449 in the Arab States and Europe); 345 interregional; and 154 global projects. In 1990, 247 projects were completed, bringing the cumulative total of all projects completed through 1990 to 3420.
- For allocations in 1990 by major function, by geographical area, and by country category, see data on page 5 (part I).

Country activities

- 385 new country projects were approved in 1990, amounting to \$38.6 million or 25.0 per cent of total allocations of \$154.2 million to country projects, compared to 372 new country projects in 1989 amounting to \$31.8 million or 29.0 per cent of total expenditures for country projects in 1989.
- Allocations to continuing country projects amounted to \$115.6 million or 75 per cent of total allocations to country projects, compared to expenditures for continuing country projects amounting to \$77.6 million in 1989 or 70.9 per cent of total expenditures for country projects.
- For allocations to country activities, by work plan category, and by priority and non-priority country and regional activities, see tables, page 6 (part I).

*Through accession of the German Democratic Republic to the Federal Republic of Germany with effect from 3 October 1990, the two German States have united to form one sovereign State. As from the date of unification, the Federal Republic of Germany acts in the United Nations under the designation of "Germany".

Priority countries

- By decision 88/34 I, adopted at its thirty-fifth session in June 1988, the Governing Council, *inter alia*, approved a revision of the criteria for designation of priority countries for UNFPA assistance. Under the revised criteria, 56 countries have been given priority status. By geographic area, these priority countries number: Africa, 31; Asia and the Pacific, 16; Latin America and the Caribbean, 3; and Arab States, 6.
- Of the total amount of resources allocated to country programmes and projects in 1990, 74.1 per cent was allocated to these 56 priority countries, compared to 76.5 per cent of expenditures for these countries in 1989.
- Total allocations in 1990 to the 56 priority countries amounted to \$114.3 million, compared to \$83.7 million in expenditures for these countries in 1989.

Intercountry activities

- Allocations for intercountry activities (regional and interregional) totalled \$56.6 million in 1990, compared to \$48.1 million in expenditures in 1989. By category of activity, these allocations were: regional, \$29.8 million in 1990, compared to \$25.7 million in expenditures in 1989; interregional, \$26.8 million in 1990, compared to \$22.4 million in expenditures in 1989.
- Intercountry programmes accounted for 26.9 per cent of 1990 total allocations, compared to 30.5 per cent of expenditures in 1989.

Execution of projects

- The number of projects directly executed by Governments in 1990 numbered 736, compared to 651 in 1989, and totalled \$45.2 million or 21.4 per cent of total 1990 programme allocations, compared to \$22.3 million or 14.2 per cent of programme expenditures in 1989.
- For allocations in 1990 by executing agency, see table, page 5 (part I).

Programme review and strategy development missions

- In 1990, UNFPA undertook programme review and strategy development missions to 19 countries - 7 in Africa (Burkina Faso, Cape Verde, Congo, Mauritania, Mozambique, Niger and Sierra Leone), 3 in Arab States and Europe (Albania, Morocco and Tunisia), 5 in Asia and the Pacific (Bangladesh, India, Malaysia, Sri Lanka and Viet Nam) and 4 in Latin America and the Caribbean (Bolivia, Caribbean (English-speaking countries), Dominican Republic and Honduras) - bringing the total missions (needs assessment missions and programme review and strategy development missions) conducted since 1977 through 1990 to 138.

Administration and personnel

- In 1990, administrative and programme support services (APSS) expenditures (provisional), including both headquarters and field office costs, were \$37.8 million (net of \$2.6 million of overhead credits) or 17.8 per cent of the 1990 total estimated income of \$212.4 million. Comparable administrative expenditures in 1989 were \$32.1 million or 17.3 per cent of the 1989 income of \$185.3 million.
- As of 1 January 1991, in accordance with Governing Council decisions 85/20 of June 1985, 86/35 of June 1986, 87/31 of June 1987, 88/36 of June 1988, 89/49 of June 1989 and 90/36 of June 1990, the total number of authorized budget posts numbered 694, comprising 260 Professional (including 93 national programme officers) and 434 General Service staff. These included 100 Professional and 132 General Service posts at headquarters, 2 Professional and 2 General Service posts in Geneva and 156^{**} Professional and 302 local General Service posts in the field.
- The percentage of women on UNFPA's Professional staff at headquarters and in the field continued to be over 39 per cent, one of the highest percentages among United Nations agencies and organizations. In 1991, the percentage is expected to be at least 42 per cent.
- UNFPA continued to maintain a close operational relationship with UNDP, which also provides the Fund on a reimbursable basis with some administrative support for financial and computer services, personnel administration and travel services and the processing of Governing Council documents. Following agreement between UNDP and UNFPA's on the subvention arrangement, approved by the Governing Council at its thirty-fifth session (decision 88/36), UNFPA's reimbursement to UNDP for the services rendered was set in the budget at \$3.2 million for the biennium 1990-1991. In 1990, UNFPA reimbursed UNDP the amount of \$1.8 million.

^{**}Includes 93 national programme officers.

UNFPA PROGRAMME IN 1989 AND 1990: AT A GLANCE

(Data for 1989 are expenditures; data for 1990 are allocations¹)

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	<u>UNFPA assistance by major function</u>		<u>Percentage of total programme</u>	
	<u>In thousand \$US</u>		<u>1989</u>	<u>1990</u>
	<u>1989</u>	<u>1990</u>		
Family planning	70 457	96 495	44.7	45.8
Communication and education	26 576	37 047	16.9	17.6
Basic data collection	18 225	22 255	11.6	10.5
Population dynamics	20 369	21 237	12.9	10.1
Formulation and evaluation of population policies	12 174	17 240	7.7	8.2
Implementation of policies	63	231	0.1	0.1
Multisector activities	3 973	5 969	2.5	2.8
Special programmes	<u>5 659</u>	<u>10 417</u>	<u>3.6</u>	<u>4.9</u>
Total	157 496	210 891	100.0	100.0

	<u>UNFPA assistance by geographical region</u>		<u>Percentage of total programme</u>	
	<u>In thousand \$US</u>		<u>1989</u>	<u>1990</u>
	<u>1989</u>	<u>1990</u>		
Africa	39 047	65 579	24.8	31.1
Arab States and Europe	17 496	24 087	11.1	11.4
Asia and the Pacific	58 120	71 345	36.9	33.8
Latin America and the Caribbean	20 413	23 089	13.0	11.0
Interregional and Global	<u>22 420</u>	<u>26 791</u>	<u>14.2</u>	<u>12.7</u>
Total	157 496	210 891	100.0	100.0

	<u>UNFPA assistance by country/intercountry category</u>		<u>Percentage of total programme</u>	
	<u>In thousand \$US</u>		<u>1989</u>	<u>1990</u>
	<u>1989</u>	<u>1990</u>		
Country	109 406	154 223	69.5	73.1
Intercountry	<u>48 090</u>	<u>56 668</u>	<u>30.5</u>	<u>26.9</u>
Total	157 496	210 891	100.0	100.0

	<u>UNFPA assistance by country category, all regions</u>		<u>Percentage of total country programme</u>	
	<u>In thousand \$US</u>		<u>1989</u>	<u>1990</u>
	<u>1989</u>	<u>1990</u>		
Priority country	83 670	114 314	76.5	74.1
Other country	<u>25 736</u>	<u>39 909</u>	<u>23.5</u>	<u>25.9</u>
Total	109 406	154 223	100.0	100.0

	<u>UNFPA assistance by executing agency</u>		<u>Percentage of total programme</u>	
	<u>In thousand \$US</u>		<u>1989</u>	<u>1990</u>
	<u>1989</u>	<u>1990</u>		
Government-executed projects ²	42 031	60 669	26.7	28.8
United Nations	27 797	30 923	17.6	14.7
Regional commissions	9 114	10 876	5.8	5.2
ILO	10 306	14 430	6.5	6.8
FAO	3 666	6 461	2.3	3.1
UNESCO	9 866	14 260	6.3	6.8
UNEP	85	84	0.1	0.0
WHO	26 242	28 340	16.7	13.4
UNICEF	0	1 836	0.0	0.9
UNFPA ³	7 493	20 364	4.7	9.6
UNIDO	2	0	0.0	0.0
Non-governmental organizations	19 789	21 271	12.6	10.1
UNDP (OPS)	<u>1 105</u>	<u>1 378</u>	<u>0.7</u>	<u>0.6</u>
Total	157 496	210 892	100.0	100.0

¹ Expenditure data for 1990 are not available until after the due date for submission of this document to the Governing Council.

² Includes UNFPA assistance to procurement for Governments' projects as follows: \$19.7 million in 1989 and \$15.5 million in 1990.

³ See footnote 2.

UNFPA expenditures (1989) and allocations (1990), by region

By major sector	AFRICA (SUB-SAHARAN)				ARAB STATES AND EUROPE				ASIA AND THE PACIFIC			
	Percentage of total programme		Percentage of total programme		Percentage of total programme		Percentage of total programme		Percentage of total programme		Percentage of total programme	
	(in US\$ 000)	1989	(in US\$ 000)	1990	(in US\$ 000)	1989	(in US\$ 000)	1990	(in US\$ 000)	1989	(in US\$ 000)	1990
Family planning	13 162	22 024	33.7	33.6	5 483	7 918	31.3	32.9	32 350	45 826	55.7	64.2
Communication and education	8 662	14 775	22.2	22.5	3 910	4 987	22.3	20.7	8 026	9 754	13.8	13.7
Basic data collection	6 441	10 950	16.5	16.7	1 564	2 148	8.9	8.9	7 247	5 356	12.5	7.5
Population dynamics	4 299	6 365	11.0	9.7	3 828	4 628	21.9	19.2	7 663	4 631	13.2	6.5
Formulation and evaluation of population policies	4 442	7 029	11.4	10.7	1 149	1 367	6.6	5.7	765	1 703	1.3	2.4
Implementation of policies	9	0	0.0	0.0	45	231	0.3	0.9	9	0	0.0	0.0
Multisector activities	772	1 959	2.0	3.0	343	645	2.0	2.7	727	1 667	1.2	2.3
Special programmes	1 260	2 477	3.2	3.8	1 174	2 163	6.7	9.0	1 333	2 409	2.3	3.4
TOTAL REGION	39 047	65 579	100.0	100.0	17 496	24 087	100.0	100.0	58 120	71 346	100.0	100.0
By country category:												
Priority country	24 500	43 448	62.7	66.2	9 347	11 824	53.4	49.1	47 323	55 319	75.1	58.9
Other country	4 789	11 035	12.3	16.8	4 232	7 802	24.2	32.4	10 797	16 027	16.6	20.0
TOTAL COUNTRY	29 289	54 483			13 579	19 626			58 120	71 346		
Regional	9 758	11 096	25.0	17.0	3 917	4 461	22.4	18.5	6 652	8 935	10.3	11.1
TOTAL REGION	39 047	65 579	100.0	100.0	17 496	24 087	100.0	100.0	64 772	80 281	100.0	100.0
LATIN AMERICA AND THE CARIBBEAN												
By major sector	Percentage of total programme				Percentage of total programme				Percentage of total programme			
	Percentage of total programme		Percentage of total programme		Percentage of total programme		Percentage of total programme		Percentage of total programme		Percentage of total programme	
	(in US\$ 000)	1989	(in US\$ 000)	1990	(in US\$ 000)	1989	(in US\$ 000)	1990	(in US\$ 000)	1989	(in US\$ 000)	1990
Family planning	10 252	10 033	50.2	43.5	9 210	10 694	41.1	40.0	9 210	10 694	41.1	40.0
Communication and education	2 311	2 818	11.3	12.2	3 666	4 713	16.4	17.6	3 666	4 713	16.4	17.6
Basic data collection	1 712	2 325	8.4	10.1	1 260	1 475	5.6	5.5	1 260	1 475	5.6	5.5
Population dynamics	3 171	3 658	15.5	15.8	1 408	1 957	6.3	7.3	1 408	1 957	6.3	7.3
Formulation and evaluation of population policies	1 893	1 997	9.3	8.6	3 926	5 144	17.5	19.2	3 926	5 144	17.5	19.2
Implementation of policies	0	0	0.0	0.0	0	0	0.0	0.0	0	0	0.0	0.0
Multisector activities	245	589	1.2	2.6	1 887	1 109	8.4	4.1	1 887	1 109	8.4	4.1
Special programmes	829	1 669	4.1	7.2	1 063	1 699	4.7	6.3	1 063	1 699	4.7	6.3
TOTAL REGION	20 413	23 089	100.0	100.0	22 420	26 791	100.0	100.0	22 420	26 791	100.0	100.0
By country category:												
Priority country	2 499	3 760	12.2	16.3								
Other country	12 572	13 943	61.6	60.4								
TOTAL COUNTRY	15 071	17 703										
Regional	5 342	5 386	26.2	23.3								
TOTAL REGION	20 413	23 089	100.0	100.0								

* The figures for 1989 and 1990 are for the 56 priority countries that were so designated in accordance with decision 88/34.

I. REVIEW OF THE PROGRAMME BY GEOGRAPHIC REGION

A. Africa (sub-Saharan)

1. Since the adoption of UNFPA's four-year Africa strategy in 1987 (see document DP/1987/37), UNFPA allocations and expenditures for population programmes in sub-Saharan Africa have risen dramatically. This trend accelerated during 1990, as the Fund's regular resource allocations for the region reached \$65.6 million, a 31 per cent increase over the \$50 million allocated the previous year. UNFPA activities in the region also attracted an additional \$8.1 million in multi-bilateral resources during the year. Such growth clearly reflects an increasing concern among most countries in sub-Saharan Africa with problems associated with fertility, mortality, migration and urbanization. It also demonstrates a growing willingness on their part to address these concerns through the development of population programmes, which, in turn, has been reinforced by an expanding capacity to absorb higher levels of assistance and to implement such programmes within existing and newly created infrastructure.

2. It is unfortunate, however, that such increased concern, growing willingness and expanded capacity should come at a time when most countries in the region are least able to sustain investments in population and related social programmes. Indeed, deteriorating economic conditions in most countries are eating away such investments and threatening to undermine the fruits of past efforts, especially in the relatively expensive programming areas of maternal and child health/family planning (MCH/FP) and closely associated information, education and communication (IEC). Spiralling contraceptive needs in response to rapidly expanding demand for family planning services only compound this economic dilemma. Thus, only through increased donor support, at least over the medium term, can the countries of the region sustain recent achievements and expand services.

3. The economic crisis in the region has magnified the importance of having an effective strategy for population assistance with clearly defined objectives and well-established priorities, such as that approved in 1987 by the Governing Council in decision 87/30. As shown below, the UNFPA strategy has made considerable progress towards attaining its primary objectives, which are: (a) to improve the knowledge and understanding of population issues in order to stimulate the adoption and development of population policies and programmes; and (b) to enhance Governments' ability to implement such policies and programmes effectively. A detailed status report on the implementation of the strategy is provided in document DP/1991/33, which is being presented to the Council at this session.

4. UNFPA support to MCH/FP programmes in this region during 1990 continued to take into account the guiding principles of the Fund's strategy for sub-Saharan Africa. These include, among other things, helping countries to provide their populations with better access to information on birth spacing and family planning and to expand and improve the quality of health services in order to reduce infant mortality, maternal morbidity and high fertility. To this end, UNFPA has concentrated its assistance on developing the skills and knowledge of all categories of health personnel through training in MCH/FP, on developing and improving statistical systems for MCH/FP services, and on undertaking operations research on family planning delivery systems in various cultural and socio-economic settings. During 1990, UNFPA allocated approximately \$23 million to MCH/FP activities in the region, or 31.4 per cent of total allocations to sub-Saharan Africa (including regular and multi-bilateral projects).

5. Although it is perhaps unrealistic to expect dramatic changes when the majority of most populations in sub-Saharan Africa still do not have access to MCH/FP services, past efforts helped achieve notable

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results in a number of countries. For example, Botswana, Mauritius, and Zimbabwe, where MCH/FP services are widely available, registered significant decreases in fertility as well as in maternal and child mortality. Moreover, Kenya recorded its first drop in total fertility, apparently the result of a revitalization and expansion of family planning services. Indirect evidence of similar effects, primarily in the form of greatly increased contraceptive consumption, has been noted in a number of other countries such as Ghana, Rwanda and Zambia.

6. UNFPA once again allocated nearly half of its assistance to MCH/FP activities in the region to training programmes. At the country level, as part of the Fund's support to national MCH/FP programmes, rural health workers, traditional birth attendants (TBAs) and nurse/midwives were trained in family planning techniques as well as in family planning communication and motivation. As a follow-up to a diagnosis of management information and logistics systems in support of MCH/FP programmes, UNFPA provided assistance for the formulation of projects in 11 countries aimed at improving these two vital management components (Botswana, Cameroon, Congo, Ethiopia, Ghana, Malawi, Sierra Leone, United Republic of Tanzania, Togo, Uganda and Zambia).

7. UNFPA provided support to at least one MCH/FP project in each of the 43 countries of the region. In many countries, the Fund supported projects that were tailored to special target groups (rural dwellers, urban poor, women, youth) or based on different types of delivery systems such as integrated MCH/FP hospitals and clinics, community-based centres and decentralized outreach systems (Ethiopia, Kenya and the United Republic of Tanzania). Quite a few countries, including Burundi, Cameroon, Congo, Ethiopia, Gambia, Madagascar, Malawi, Mauritania, Namibia, United Republic of Tanzania and Uganda, are actively seeking to considerably expand the availability of services. Burundi officially inaugurated its national family planning programme during a visit of the UNFPA Executive Director, and Senegal is in the final stages of preparing its national family planning programme.

8. During 1990, UNFPA continued to assist Governments in the development and implementation of population and family life IEC programmes. UNFPA allocated approximately \$16 million to the IEC sector, or 21.7 per cent of total allocations to the region (including regular and multi-bilateral resources). Among the activities supported by UNFPA during the year were the organization of population seminars and workshops for policy makers and opinion leaders in Botswana, Burkina Faso, Cape Verde, Congo, Ethiopia, Gabon, Gambia, Guinea-Bissau, Kenya, Lesotho, Malawi, Mali, Mauritania, Senegal, United Republic of Tanzania and Zambia, as well as the introduction of family life education into non-formal training programmes for youth and adolescents in Botswana, into parents' education programmes in Malawi, Senegal and United Republic of Tanzania, and into the training programmes of labour organizations and trade unions in Cameroon, Ethiopia, Kenya, Seychelles, United Republic of Tanzania, Uganda and Zambia. UNFPA also helped to develop, in collaboration with ministries of information and national and international mass media organizations, population IEC programmes for the public at large in Angola, Botswana, Cameroon, Ethiopia, Kenya, Lesotho, Malawi, Mauritania, Mozambique, Namibia, Uganda and Zimbabwe. The Fund also supported an increasing number of activities to integrate population and family life messages into adult literacy classes and agricultural extension programmes, including those in Ethiopia, Kenya, Lesotho, Malawi, Mali, Mauritania, Mozambique, Niger, Nigeria, Rwanda, United Republic of Tanzania and Uganda.

9. In the formal education sector, UNFPA continued to support more than 30 projects aimed at introducing population and family life education into the curricula of primary and secondary schools. The activities cover all phases of the integration process, from the preparatory stage of research and testing of

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educational materials (Burundi, Congo, Ethiopia, Mali, Mauritania, Senegal, United Republic of Tanzania, Uganda and Zaire), through the introduction of population curricula into selected levels in pilot schools (Burkina Faso, Guinea, Kenya, Madagascar, Mozambique, Niger, Seychelles and Zambia), to the full integration of population education into the entire school curricula (Mauritius, Sao Tome and Principe and Sierra Leone) and into teachers' training colleges and refresher courses (Niger and Sierra Leone). Formal training in population education is also being introduced into agricultural colleges in Ethiopia, Sierra Leone and Malawi and into the Institute for Development Management in the United Republic of Tanzania.

10. While almost all Governments in the region recognize the importance of integrating population factors into the development process, their commitment to the formulation and implementation of sustainable population policies and programmes generally needs to be strengthened. During 1990, UNFPA continued to support a wide range of activities to create awareness and understanding among policy makers and the public at large about the effects of rapid population growth on economic development. The Fund also supported the development of national skills in demography and the promotion of understanding of the complex interrelationship between population and development in all countries of the region. UNFPA further provided assistance for the collection and analysis of population data and the integration of population factors into development plans. The Fund also provided or arranged technical and financial assistance to many countries to help establish various types of population planning bodies, including units, councils and commissions. Such efforts led several countries, including Rwanda, to either formally adopt a population policy or modify an existing one. Other countries such as Burkina Faso, Cameroon, Mali, Niger, United Republic of Tanzania and Zaire continued work on policies which await formal adoption.

11. In response to the growing concern throughout the region about the interaction between population and environmental factors, UNFPA is providing support for a pilot study on the island of Mauritius. The study seeks to improve the understanding of the interaction between population variables, changes in the socio-economic structure and environmental factors. The aim of the study is two-fold: to design a methodology by which to analyse the interrelationship between population, development and the environment; and to create awareness about the underlying mechanisms at work and about potential future undesirable changes and the options available to avoid them.

12. Training in demography at the undergraduate and masters levels has been introduced in many universities and centres throughout the region, with the support of UNFPA. UNFPA provided assistance to many countries to conduct awareness-creation seminars and workshops for government officials as well as for religious, opinion and community leaders, among others. Such seminars and workshops, which are generally run by training staff together with staff of planning ministries, were offered in Botswana, Central African Republic, Comoros, Congo, Cote d'Ivoire, Ethiopia, Kenya, Lesotho, Madagascar, Mali, Mauritius, Mozambique, Sierra Leone, Swaziland, United Republic of Tanzania, Uganda and Zambia.

13. The census remains a key source of information for developing population policies and measuring progress in the implementation of these policies. In 1990, UNFPA supported the analysis of census data in Burkina Faso, Cameroon, Central African Republic, Cote d'Ivoire, Ethiopia, Kenya, Lesotho, Mali, Niger, Sierra Leone, Swaziland, United Republic of Tanzania, Zaire, Zambia and Zimbabwe and provided assistance for such necessary preparatory activities as cartography and training in Comoros, Madagascar and Rwanda. Finally, census enumeration itself took place in 1990 in Burundi, Cape Verde, Mauritius and Zambia. UNFPA provided a total of \$9.7 million from its regular resources for all such activities and channeled an additional \$5.5 million through multi-bilateral arrangements.

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14. UNFPA conducted Programme Review and Strategy Development (PRSD) exercises (see paras. 253-258 in part III) in Burkina Faso, Cape Verde, Congo, Mauritania, Mozambique, Niger and Sierra Leone during 1990, but had to postpone those planned for Rwanda and Zaire. These joint UNFPA/Government exercises helped clarify the overall strategic framework for population activities in the countries concerned and should lead to more effective population programmes in each of these countries. In order to enhance the utility of PRSD exercises in sub-Saharan Africa, UNFPA organized a meeting in New York to review experiences and suggest modifications in PRSD procedures. The recommendations of the participants, who were extremely positive about the PRSD exercise, are currently being reviewed by the Fund.

15. Finally, shortly after the emergence of Namibia as the region's newest nation, UNFPA sent several missions to that country to develop an initial programme of assistance. The Fund approved several projects in support of a census and of MCH/FP services and formulated an IEC project.

16. Regional programme. Of the 1990 combined total allocations of \$73.7 million indicated in paragraph 1, \$11.9 million, or 16 per cent, went to the regional programme. In the area of MCH/FP, the Fund completed an analysis of regional MCH/FP training needs begun last year, considering the requirements of English-, French- and Portuguese-speaking countries separately. The predominant need for most categories of service personnel in all three groups was training in IEC techniques, followed by training in management and clinical skills.

17. The regional MCH/FP training course at the Mauritius Institute of Health offered four courses on fertility management to approximately 80 participants from English- and French-speaking African countries. Training courses on clinical fertility techniques were conducted at the Centre de Formation de l'Office Nationale de la Famille et la Population in Tunisia, with the participation of trainees from French-speaking African countries. During the year, Laval University and the University of Montreal, both in Canada, trained 30 and 15 health and social development personnel, respectively, from francophone Africa in the management of MCH/FP programmes and in the design and implementation of support communications activities. In order to accommodate the needs for training in fertility management of lusophone African countries, a training course for trainers in that field was conducted for 15 trainees, in collaboration with the Portuguese Ministry of Health.

18. During 1990, pilot studies of service providers and potential users of family planning services were completed under the terms of a joint UNFPA, World Bank, International Planned Parenthood Federation (IPPF), World Health Organization (WHO) regional project in Nigeria, Kenya and Ghana. Additional funding is needed, however, to expand the studies to other parts of these countries as well as to a number of other countries. The design of the study calls for considerable involvement of national decision makers and provides information of practical utility for programme design and/or reformulation.

19. The year 1990 witnessed the publication of the findings of a major review, supported jointly by UNFPA and the Canadian International Development Agency (CIDA), of IEC programmes and projects in Botswana, Ethiopia, Kenya, Lesotho, Malawi, Mauritius, Swaziland, Uganda, United Republic of Tanzania, Zambia and Zimbabwe. Numerous deficiencies in the design of IEC materials and in the development of a comprehensive IEC strategy were found to be largely the result of a lack of appropriate training of those who direct such efforts. As a consequence, UNFPA is intensifying its efforts to develop a regional IEC training strategy for support under the 1992-1995 regional programme (see document DP/1991/29 and Add.1).

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20. Reviews of the performance of a regional project aimed at enhancing the availability and exchange of population information indicated the need for a refocusing of efforts from 1991 onwards. Other IEC efforts included the organization of regional seminars in Ghana and Togo for journalists from throughout the region. Unfortunately, it again proved impossible to establish regional clearing-houses for IEC materials, as had been anticipated in the regional programme. As a result, this activity will not get under way until the 1992-1995 regional programme cycle.

21. Census activities continued to receive substantial support through, among others, the African Census Training Project, which is funded through a multi-bilateral arrangement with Canada and executed by the Economic Commission for Africa (ECA) and the United Nations. UNFPA-funded experts from ECA provided technical backstopping for the project.

22. UNFPA continued its support to the demographic training programmes at the Regional Institute for Population Studies (RIPS) in Ghana and the Institut de Formation et de Recherche Démographiques (IFORD) in Cameroon. The Fund also again extended assistance to the Département d'Etudes de la Population at the headquarters of the Union Douanière et Economique de l'Afrique Centrale (UDEAC/DEP) in Central African Republic and the Centre d'Etudes et de Recherches sur la Population pour le Développement (CERPOD) in Mali. The Institut Africain de Développement Economique et de Planification (IDEP), in Senegal, again played a key role in providing short-term training for government planners in population and development.

23. In a further effort to heighten the awareness of government officials about population problems as well as strengthen their commitment to resolving such problems, UNFPA continued discussions with the Organization of African Unity (OAU) on designing appropriate modalities to enable the OAU to play a catalytic role in sensitizing its member states about population issues.

24. In addition to evaluating UNFPA-supported population projects in the ECA, UNFPA reviewed the findings and recommendations of other evaluations of technical assistance such as those carried out earlier by the World Health Organization/African Regional Office (WHO/AFRO) and the International Labour Organisation (ILO). The Fund also examined the results of tripartite project reviews and reviewed the work of Population Education and Communication (PEC) teams based in Nairobi, Kenya, and in Dakar, Senegal, in order to carefully assess the adequacy of the current network of regional advisers.

25. In November, UNFPA organized a five-day regional meeting in Kampala, Uganda, to review the progress made in the implementation of the Africa strategy and to analyse and find solutions to constraints to its future implementation. The participants included all UNFPA Country Directors stationed in the region, regional advisers, United Nations agency headquarters staff, UNFPA headquarters staff and several donor representatives. The particularly frank discussions on the many problems encountered in interagency working relationships should contribute to more effective collaboration in the future at both the headquarters and field levels.

B. Arab States and Europe

Arab States

26. Most Governments continued to give increasing attention to population activities during 1990, despite the political uncertainty that engulfed the entire region in the second half of the year. This was reflected

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in part in the increasingly active role played by the UNFPA-supported International Islamic Centre for Population Studies and Research of Al-Azhar University (Cairo, Egypt), which encourages government and non-government Muslim institutions to give priority consideration to population issues and helps clarify the position of Islam towards family planning and other aspects of population. The region also made particularly active use of the technical cooperation among developing countries (TCDC) modality, especially in Algeria, Egypt, Jordan, Morocco, and Tunisia and involving African and Asian as well as other Arab countries.

27. The International Islamic Centre, which was recommended for accreditation to offer a degree in Population Science with special reference to Islam and population, organized, in January, the International Workshop on Research Methodology in Human Reproduction, which was attended by 28 scientists from Muslim countries. The following month, the Centre participated in the International Congress on Islam and Population, held in Indonesia, which adopted the Aceh Declaration, urging all Muslim countries "to formulate population policies according to country needs, integrate them into development plans and give them high priority". Some five months later, in July, the Centre also participated in the National Conference on Islam and Child Spacing, held in Somalia.

28. The year also witnessed heightened activity in population programming at the country, regional and interregional levels. Highlights of each are provided below. Among the notable achievements at the country level were a decline in fertility rates in Egypt, Morocco and Tunisia and the considerable progress made in the formulation of population policies in the Sudan and Yemen. The successful country programme in Jordan neared completion, and the UNFPA programme approved by the Council last year for the Syrian Arab Republic made significant progress in the formulation of projects. Two UNFPA-supported PRSD missions assisted the Governments of Tunisia and Morocco in formulating national country programmes for 1992-1996, both of which are being submitted to the Council this year for its consideration and approval.

29. Overall, allocations to the Arab States region during 1990 totalled \$24.1 million, with MCH/FP accounting for 36 per cent of the total, followed by IEC, 20 per cent; population dynamics, 18 per cent; special programmes, including those addressing women's issues, 10 per cent; basic data collection and analysis, 8 per cent; and population policy formulation, 6 per cent. The remaining 2 per cent went for multi-sectoral activities. The following highlights of activities in individual countries give some insight as to how this assistance was used.

30. In Algeria, UNFPA provided assistance to strengthen the administration of the Ministry of Public Health and to enhance its technical skills in developing comprehensive MCH/FP services. The Fund arranged for technical assistance for a research project on women and fertility in urban areas, as well as for collecting and analysing data at the National Statistical Office and for elaborating multimedia family planning messages at the Population Communication Unit at the National Agency for Newsreel (ANAF). Algeria was also intensely involved in TCDC training activities with Egypt, Jordan, Indonesia, Mauritania and Morocco.

31. Early in the year, UNFPA approved assistance to an inter-censal demographic survey in Djibouti aimed at obtaining an estimate of the main demographic indicators in the country, with particular attention to fertility, mortality and migration. A second project to strengthen MCH/FP services throughout the country is under preparation.

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32. Preliminary findings on the quality, effectiveness and outreach of MCH/FP services in Egypt revealed encouraging trends of decline in birth and mortality rates and in the rate of natural increase between 1988 and 1990. The Government, with UNFPA support, reintroduced injectables into the country's contraceptive mix after a three-year hiatus. UNFPA assistance also supported population education efforts aimed at school children, teachers, and the general public, the latter through extensive use of radio and television broadcasts.

33. Because of recent political developments, UNFPA had to postpone indefinitely a PRSD mission to Iraq. The mission, originally planned for September 1990, was to assist the Government in developing a national population strategy within the framework of the Government's national development objectives and policies.

34. The UNFPA country programme in Jordan supported activities in the areas of maternal and child health care, population IEC, and data collection and analysis. The programme also provided assistance to training and research aimed at further integrating population factors into socio-economic development planning.

35. In Morocco, preliminary results of the National Demographic Survey (1986-1988) were published, indicating a decline in fertility and mortality but greater migratory flows than had been projected. Implementation of an innovative pilot project to develop a communications programme on population and environment progressed well during the year, with the assistance of regional NGOs. The Government established provincial commissions to address population and environmental issues, and a unit of the Ministry of the Interior produced the first issue of a bi-monthly bulletin devoted to such issues, as well as a multimedia communications strategy to reach various sectors of the population including youth and the general public in urban and rural areas.

36. UNFPA continued to provide support aimed at strengthening the capabilities of the Directorate of National Statistics of Oman to carry out a national socio-economic and demographic survey. The survey is intended to pave the way for the 1993 census. UNFPA also assisted the Government in preparing the work programme for the census. In Qatar, a needs assessment report was translated from English into Arabic and sent to press.

37. In spite of security and other constraints, significant progress was made in Somalia under individual projects assisted by UNFPA. UNFPA assistance was used to renovate and equip two MCH/FP centres, adding a maternity ward and demonstration unit to one of them. The Government released the preliminary results of the 1986-1987 Population and Housing Census, and the final results are expected to be available soon. The UNFPA-funded project to develop and manage human resources was instrumental in raising awareness among high-level policy makers of the need to integrate population variables into development planning and to formulate a national population policy. The project is now being used to assist the Government in establishing a National Population Council to coordinate population activities in the country.

38. Extreme economic hardship resulting from drought, along with the continuing internal conflict in the country's south, once again made the Sudan a focus of world attention for emergency relief. UNFPA contributed to the United Nations relief efforts while continuing its assistance to 10 projects, with emphasis on strengthening MCH/FP services. The UNFPA projects dealing with the population census, demographic surveys and civil registration were successfully completed, while new projects to integrate family welfare activities into the organized labour sector and to strengthen the Population and Women's Unit at Ahfad

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University were launched. The UNFPA project on women in development continued its training on how to devise and carry out income-generating activities. The Fund also provided assistance to open a new centre in settlement areas for displaced people in Khartoum.

39. During the year, over 85 per cent of the activities of the third UNFPA country programme in the Syrian Arab Republic were being implemented. UNFPA increased its assistance to the MCH/FP programme, which was expanded to include 30 new health centres that were added to the MCH/FP network in rural and urban areas. UNFPA assistance was used to help reinforce 12 district health centres, establish MCH/FP training courses at all levels, and upgrade the skills of MCH/FP personnel in order to cope with the staffing demands of the network. UNFPA-funded studies on the formulation of a national multisectoral strategy for migration were completed. Well over 90 per cent of the \$10 million approved by the Council for the 1990-1994 country programme was distributed among 17 projects.

40. The UNFPA country programme for Tunisia being submitted to the Council this year for its consideration and approval has been designed to coincide with the country's eighth national economic and social development plan. Both the country programme and the eighth plan made use of the results of a survey on population and employment, which was released jointly by the National Institute for Statistics and the Department for Technical Cooperation. During the past year, UNFPA helped arrange a multi-bilateral contribution of \$600,000 from the Dutch Government to reinforce family health activities in the rural sector in Central Tunisia. The Fund also supported activities to reinforce population education in primary and secondary schools and provided vocational training for young rural women.

41. The historic unification of the north and the south and the return of approximately 1 million immigrant workers from Saudi Arabia as a result of the Gulf Crisis were the major events of the year in Yemen. The unification required a merging of the population programmes of the North and South, which took place in a series of combined tripartite review meetings throughout the year. The process is expected to be completed in 1992, when the two programmes will be merged into one. MCH/FP activities make up the largest component of both programmes. Activities in the South during the year focused on the training of paramedical staff and women leaders in MCH/FP and the in-service training of nurses and midwives. Those in the North addressed the training needs of female primary health care workers and awareness creation among community leaders. Both programmes paid special attention to training educators and teachers in integrating population education into the school system.

42. Regional programme. As in the past, most regional projects in the Arab states region were designed to backstop country projects, regional surveys and training programmes. For example, the technical assistance project of the World Health Organization/Eastern Mediterranean Regional Office (WHO/EMRO) continued to provide technical backstopping for MCH/FP projects at the country level. WHO/EMRO, among other things, held a regional meeting in July on managing family planning projects and, in collaboration with IPPF, a meeting on adolescent health in December.

43. The regional programme on population education produced part six of the Population Education Source Book entitled "Population, Health and Nutrition in the Arab Region". A booklet on AIDS prevention was also printed and distributed as part of the observances of 1990 World AIDS Day.

44. Under the Pan Arab Project for Child Development (PAPCHILD), an MCH survey was completed in Mauritania, and arrangements were finalized for a survey to be conducted in Egypt in January 1991. Arrangements for a survey in Somalia were temporarily postponed, but an agreement to conduct a survey

in the Sudan was discussed with government officials there. The relocation in September of the executing agency of PAPCHILD, the League of Arab Nations, from Tunis to Cairo does not seem to have affected the implementation of its work plan.

45. The International Islamic Centre for Population Studies and Research made significant progress in integrating population education into the curricula of both students and faculty of the University of Al-Azhar. In preparation for a survey on knowledge of population issues involving 3,000 students at the University, a pilot study was carried out with 300 students. The Cairo Demographic Centre, which received students from Africa and Asia as well as the Arab region, welcomed a new class of 35 students.

46. As a consequence of the hostilities in the region, the international staff of the Economic and Social Commission for Western Asia (ESCWA) are currently on leave and not at post at ESCWA headquarters in Baghdad, Iraq. This has resulted in the temporary suspension of ESCWA's work on demographic publications and training.

European region

47. Allocations to country projects in Europe totalled \$2 million during 1990, with 41 per cent going to MCH/FP, 32 per cent to data collection and analysis, 17 per cent to population policy formulation, 8 per cent to special programmes and 3 per cent to IEC.

48. In view of the severe economic situation in Eastern and Central Europe, UNFPA reviewed a proposal for four-year programmes (1991-1994) for three countries (Albania, Poland, and Romania) and decided to send a mission to each to assist the Governments in assessing their needs and developing a population strategy. Following a UNFPA needs assessment mission to Albania in December 1989, a country programme of \$3 million over five years (1991-1995) was developed in cooperation with the Government. The programme is being submitted to this session of the Council for its consideration and approval. Pending this approval, a project to assist the Government with the analysis of the 1989 census and another to establish a Population Studies Unit in the Faculty of Economics at Tirana University were approved by UNFPA. Projects on MCH/FP and on the status of women are being developed with the Ministry of Health and the Women's Union, respectively. The UNFPA-funded projects in Bulgaria came to an end with the international training workshop on the development of an Integrated System for Demographic, Social and Related Statistics (ISDSS). The workshop was held in April in Sofia to share the experience of the Bulgarian Government in creating the ISDSS. Bulgaria is attempting an extensive integration of all social, demographic and related economic statistics.

49. UNFPA continued to assist the Government of Cyprus in increasing national awareness of the need for integrating population factors into the development process. UNFPA also supported one fellowship for the Department of Statistics in the UNFPA Global Programme of Training in Population and Development. This training will help the Government to further its efforts to integrate population factors more fully into development policies and programmes.

50. UNFPA has been discussing with Government representatives a possible mission to Czechoslovakia to assist in formulating a population strategy and to review areas of possible donor assistance for population activities. The mortality studies country project in Hungary, which has been funded by UNFPA since 1983, is expected to come to an end in 1991. The Central Statistical Office is conducting nine studies on causes and patterns of mortality. Data from these studies are being analyzed and will be published. UNFPA also

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continued to fund a project to develop optimal storage capacity in the Central Statistical Office. Plans are under way to send a mission to Poland in the first quarter of 1991 to discuss with the Government its population goals and strategy and to determine areas of possible external assistance.

51. UNFPA funding in Portugal continued to enable the country's Family Planning Association and Status of Women Commission to reprint and develop new informational and educational material on family planning. These materials have placed particular emphasis on sex education for adolescents, both in and out of school, and on AIDS. UNFPA also approved a three-year project to assist the General Directorate of Primary Health Care to extend family planning services to all health centres and to 50 per cent of the health posts.

52. Since January 1990, UNFPA has, with the help of WHO and the United Nations, negotiated, drafted, approved and started the implementation of two projects in Romania -- one on family planning, the other for preparatory activities for a population census, which is to be carried out in early 1992. UNFPA provided support to the family planning project in response to a request from the Government for emergency assistance in 1990 to establish training courses and to provide equipment and contraceptive supplies. The project is being carried out satisfactorily.

53. A tremendous improvement in programme implementation was achieved this year in Turkey. The Government agreed on UNDP and UNFPA proposals to extend by two years their current country programmes ending in 1992, in order to have their programming period coincide with the next national five-year development plan. Turkey also hosted a third Joint Consultative Group on Policy (JCGP) meeting in 1990, at which UNICEF, UNDP, WFP and UNFPA discussed possibilities of close co-operation and co-ordination of their respective programmes in Turkey. UNFPA approved two new projects for Yugoslavia this year, one on reproductive behaviour and the status of women, and the other on training and research on methodologies for integrating demographic variables into socio-economic planning.

54. Regional programme. The regional programme in Europe consists of three continuing projects executed by the Economic Commission for Europe (ECE), and two projects executed by the Europe Regional Office of WHO, including a backstopping project for MCH/FP programmes in Central and Eastern Europe and the publication of "Entre Nous, The European Family Planning Magazine".

55. At the end of 1990, the ECE Population Unit was in the process of recruiting candidates to fill two vacant posts. It expects to be fully staffed in early 1991. The Unit completed formulating a questionnaire on population policy in Europe, which is being sent for comments and testing in five countries. It also held a meeting to finalize the questionnaire on fertility and family surveys. A comparative analysis will be conducted on conditions and characteristics of the elderly population using micro data sets from national population censuses and surveys. The ECE was requested to hold an expert meeting in July 1991 with 15 participants in order to determine the modalities for an international meeting on migration, which might be held in preparation for the 1994 International Conference on Population and Development.

56. With UNFPA support, the Global Committee of Parliamentarians on Population and Development held a Global Forum in Moscow, USSR, in January. Over 1,000 participants gathered to discuss "Development and Environment for Survival".

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C. Asia and the Pacific

57. The Asia and Pacific region has experienced rapid and substantial declines in fertility. Yet, the region's current population of 3.1 billion is expected to reach 3.5 billion by the end of the century -- some 146 million more than earlier projected. The magnitude of such unexpected growth accentuates the priority need to implement policies and programmes designed to continue to decelerate population growth throughout the region, particularly in countries with large populations and persistently high growth rates.

58. During 1990, UNFPA continued to support multisectoral population programmes in most countries in the region, allocating \$73.6 million to activities in Asia and the Pacific, or approximately 34 per cent of total UNFPA programme resources. The year was characterized by three major undertakings: the implementation of country programmes that had been approved by the Governing Council the previous year; the development of country programmes for the next cycle; and the organization of and/or participation in workshops and conferences pertinent to UNFPA's work.

59. In June 1990, the Governing Council approved UNFPA country programmes for the Democratic People's Republic of Korea (\$6 million), the Islamic Republic of Iran (\$4 million) and Indonesia (\$25 million). UNFPA fielded PRSD missions to Bangladesh, India, Malaysia, Sri Lanka and Viet Nam in preparation for a new cycle of programmes in each of those countries. The Fund subsequently formulated new country programmes for Bangladesh, India and Malaysia, each of which is being presented to the Council at this session for its consideration and approval.

60. One of the major events of the region during the year was the highly successful South Asian Study Intercountry Workshop, held in New York in July. The purpose of the workshop was to bring together representatives of Governments, national NGOs, donor countries, United Nations agencies, the World Bank and The Population Council to discuss the major findings of the UNFPA-organized study of the population programmes of Bangladesh, India, Nepal and Pakistan. The workshop was most notable for the recommendations it generated concerning the future direction of population programmes in the South Asia region. Participants agreed with the study on the urgent need to upgrade the quality of family planning services and to redouble efforts to generate demand for such services in these South Asian countries.

61. Two other important meetings held during the year were the Third Conference of the Asian Forum of Parliamentarians on Population and Development, which met in Bangkok, Thailand, in October, and the Safe Motherhood South Asian Conference, which met in Lahore, Pakistan, in March. The Asian Forum, attended by some 200 parliamentarians from 22 Asian countries, adopted the Bangkok Declaration, which reiterated the goal, first enunciated at the Asian Conference of Parliamentarians on Population and Development in Beijing in 1981, of achieving an annual population growth rate of 1 per cent for the region by the year 2000. The Declaration is especially notable for its extremely comprehensive programme of action. The Safe Motherhood Conference, co-sponsored by UNFPA, the World Bank, IPPF and a number of other United Nations agencies, called on government ministries, NGOs and international agencies to work together to formulate a Safe Motherhood Plan of Action aimed at, *inter alia*, mobilizing political will and commitment, involving community members, sharing information and experiences, and sensitizing men.

62. Maternal and child health and family planning. The MCH/FP sector again received the largest amount of support in the Fund's Asia and Pacific programme, accounting for some 64.2 per cent of total allocations to the region. This assistance covered a wide range of activities, from the resumption of child-spacing

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activities in Afghanistan and the launching of two MCH projects in Nepal to the development of new strategies in Indonesia and Thailand, where family planning programmes are approaching maturity.

63. An important area of UNFPA activity throughout the region during 1990 was the training of MCH/FP personnel. For example, in September, Hong Kong conducted its first training course on MCH/birth spacing for medical doctors and nurses, covering such topics as demographic issues, contraceptive methods, and population and environment, among others. In Malaysia, the Federation of Family Planning Associations conducted courses in MCH/FP and related matters for doctors and field workers. MCH/FP training activities in Pakistan included refresher and orientation courses for mid-level, clinic-based health and family planning workers in the delivery of family planning services. In the Philippines, which is in the midst of a comprehensive review and restructuring of training in family planning programmes, three workshops focused on developing clinical standards, revising training curricula and developing training materials. UNFPA supported a workshop on Training of Family Planning Personnel from Developing Countries in Family Planning Programme Management, which was held in the Republic of Korea in September. Twenty-seven senior-level managers of government and NGO family planning programmes from 12 countries attended this workshop. The Fund also provided assistance during the year to retrain MCH/FP health personnel at the grass-roots level in Viet Nam and to conduct a workshop on participatory training for trainers at regional training centres in Nepal.

64. Another area of continuing concern to the Fund in the MCH/FP sector during the year was the provision of contraceptive supplies to the countries of the region. Given the increasing demand and high cost, UNFPA promoted self-reliance in the procurement and manufacture of contraceptives where economically feasible. In keeping with its high priority on self-sufficiency in the production of contraceptives, India commissioned, with UNFPA assistance, the construction of a facility capable of manufacturing 5 million Copper T IUDs each year. The Indian Government also established special centres to ensure quality control of locally-produced contraceptives. UNFPA also provided support for three projects, currently under preparation, to help China progressively convert to more modern and effective contraceptive methods. Commercial retail sales of contraceptives increased steadily in Indonesia, as more than 2 million women, or about 15 per cent of all couples practicing family planning, obtained contraceptives through the private sector. In Viet Nam, the condom factory recently built with the help of UNFPA resources produced and distributed its first batch of 20 million condoms. This was greatly facilitated by the Government of Australia, which contributed, through a multi-bilateral arrangement with UNFPA, to the purchase of raw materials for condom production.

65. Bangladesh, with UNFPA assistance, extended MCH/FP services to rural areas by dispatching an additional 1,000 family welfare visitors (FWVs) to the countryside to provide clinical contraceptive services to some 20,000 people at the union level and to motivate them to use such services. Bangladesh also introduced basic training in family planning into its immunization outreach programme, strengthened its MCH/FP logistics and supply distribution systems, and trained district offices in logistics management. Such activities were accompanied by the establishment of an annual procurement and distribution plan for contraceptives and MCH/FP-related medical equipment.

66. A joint UNICEF/UNFPA project to strengthen MCH/FP services in 300 of the poorest counties of China succeeded in developing and printing technical training materials for such areas as family planning, safe motherhood, breastfeeding, acute respiratory infections and prevention of diarrhoea. The project further helped to introduce interpersonal communication training modules to experts at the regional, provincial and county levels.

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67. Within the context of area development projects, UNFPA assisted India in substantially strengthening its maternal and child health and family welfare infrastructure. The project areas are in the north and west, which have high maternal and child morbidity and mortality rates compared to the national average. The Fund extended its support to a second-phase area project in Rajasthan and initiated similar projects in Maharashtra and Himachal Pradesh.

68. UNFPA approved a major project for the Islamic Republic of Iran to train some 1,900 midwives and family planning advocates in 30 training centres. The aim of the project is to reduce the maternal mortality rate in rural areas and to increase contraceptive prevalence from 24 per cent to 31 per cent nation-wide. UNFPA assistance in the Maldives helped to launch follow-up actions to a child-spacing and family health project, the aim being to extend child-spacing services throughout the island. A key component of the follow-up is a knowledge, attitude and practice (KAP) survey, which is intended to provide a comprehensive database for evaluating family planning activities. UNFPA maintained its support to 95 family welfare centres in Pakistan. The centres, which are part of the Government's national health network, provide a package of family planning and MCH services in selected districts throughout the country.

69. In the South Pacific subregion, UNFPA supported a range of MCH/FP activities aimed at strengthening the MCH/FP programme through training of medical personnel; improving supervisory and follow-up activities in the outer islands; encouraging the participation of NGOs and villages in the programme; increasing awareness of the importance of family planning among community leaders; increasing contraceptive prevalence and improving the monitoring and evaluation of MCH/FP services. A follow-up study on 1,500 contraceptive acceptors found a progressively diminishing acceptance rate over time, from 82 per cent for the first six months to 43 per cent at 24 months.

70. Information, education and communication. In 1990, UNFPA supported 86 IEC projects in the region with a total allocation of \$9.7 million. World Population Day on 11 July 1990 was a major event in the region, with almost all countries observing the Day through a variety of activities, including speeches, rallies, seminars, workshops, films and radio and television programmes.

71. A number of population IEC activities were undertaken in Bangladesh during the year, including workshops on the family planning programme for journalists working in rural areas; film screenings in rural and urban areas; a workshop for officials on developing a population communication strategy, and a workshop for district-level project directors on family welfare education and motivation in rural cooperatives. Awareness creation on population issues continued to be an important concern in Bhutan, a country with one of the highest agricultural population densities in the world and one in which the Government wishes to balance population growth with economic resources. In 1990, Bhutan started its first-ever population education programme aimed at introducing population content into the school curricula, training large numbers of village workers and sensitizing officials and community leaders.

72. In China, the Population Information and Research Centre held an international seminar on population information in November. The Centre also trained staff of 6 of the 14 Population Information (POPIN) Centres in Asia in the utilization of research findings. The Fund approved a new project for the Democratic People's Republic of Korea to assist the Government in implementing a comprehensive communications plan in support of MCH/FP activities in six provinces and 18 counties. In India, population education continued to be a priority area of UNFPA assistance. UNICEF and UNFPA started a new joint initiative to produce instructional kits for adult education, which, when combined with family welfare

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education, has proven to be quite effective in creating population awareness among people in the organized labour sector in India.

73. During 1990, a follow-up phase of a population education project became operational in the Maldives. The project concentrated on developing curricula and related materials for use in primary schools and extending population education to adults through radio programmes. A workshop in Nepal focused on developing population education materials to meet the emerging needs of different target groups. India, Pakistan and Sri Lanka also participated in the workshop. As part of government efforts to involve local religious leaders in promoting family planning messages, Pakistan sent selected religious leaders to Bangladesh, Egypt and Indonesia to observe family planning programmes that had attained a remarkable degree of success. In the Philippines, UNFPA supported two new IEC projects being implemented by the Department of Agriculture and the Department of Agrarian Reform. Both are aimed at improving the knowledge and practice of and attitudes towards family planning of government personnel working in these departments as well as of their target clientele. While the IEC materials developed in Viet Nam were well received by target audiences, they were not sufficient to meet the growing demand of these groups.

74. Data collection and analysis. UNFPA channelled its support in this area primarily to the 1990 and 1991 rounds of censuses, for preparatory activities as well as for the actual enumeration and consequent analysis and dissemination of the results. Censuses were conducted during 1990 in China, Papua New Guinea, the Maldives and the Philippines, the latter two being population and housing censuses. Preliminary results of the census in the Maldives were released within a fortnight of the completion of field work, and the first set of final tables were available within seven months after enumeration.

75. UNFPA provided assistance for preparatory census activities in Bangladesh, India, Nepal and Pakistan, each of which is scheduled to conduct a population census in 1991 with UNFPA support. As part of a communications campaign preceding the census, India produced a short television film aimed at sensitizing viewers on gender issues and the contributions of women to economic activities. There was also considerable census-related activity in the Lao People's Democratic Republic, which organized and conducted intercensal population counts and a sample housing survey, with the assistance of specialists in population statistics from the Economic and Social Commission for Asia and the Pacific (ESCAP).

76. Other UNFPA-supported activities during the year included preparatory activities for the 1992 census in the Democratic People's Republic of Korea, a workshop on improving vital statistics in the states of Sabah and Sarawak in Malaysia, data collection and integration of population and development activities in Myanmar, seven census projects and two civil registration projects in the South Pacific, and publication of a report on the analysis of a 5 per cent sample of the 1989 census in Viet Nam.

77. Women, population and development. During the year, UNFPA continued to stress the importance of improving the status and role of women in society and in development. UNFPA-supported activities thus focused on decreasing fertility rates so as to improve women's health and enhancing the empowerment of women through the development of income-generating activities. The Fund also placed increasing emphasis on "mainstreaming" women's concerns into population and development activities and into the planning process itself. Two two-week training programmes for women leaders on community development and family planning were held in the Republic of Korea, in which a total of 32 women leaders from 12 countries participated.

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78. About 15-20 per cent of UNFPA's third cycle of assistance in China is concentrated on improving the status of women. Activities include, among other things, the development of income-generating activities utilizing revolving funds to bring women into the work force, the setting up of a social support structure, training in child care and family planning, and instruction in household-income and business management. Innovative income-generating activities for women also became operational in India during the year: one activity directed at working women in urban slums and rural areas in Tamil Nadu, the other addressed to the needs of women involved in sericulture in Rajasthan.

79. Other activities of note in this area included an assessment of the implementation of the National Plan of Action for Women's Development in Nepal; the implementation of a project in the Philippines to improve the lot of disadvantaged women in small fishing communities in Capiz and Pangasinan through better access to credit for income-generating activities; the strengthening of women's participation in development activities in Malaysia and the conduct of research on the status and role of Malaysian women in development and in family welfare.

80. Regional programme. During 1990, the regional programme continued to focus mainly on providing technical advisory services, organizing meetings and workshops and conducting training and research. In terms of UNFPA programme areas, IEC programmes received the largest share of regional programme resources (47 per cent) followed by family planning programmes (25 per cent).

81. In the area of population education, UNFPA approved a project to promote technical exchange among South Asian countries. This two-year project, which started in January, provides for the development of national capabilities through short-term training programmes; the development of prototype materials through subregional workshops; the conduct of joint research and the establishment of an information network within the subregion to facilitate the collection, exchange and use of population education materials.

82. During the year, UNFPA again supported a number of workshops, training courses and seminars through its regional programme. These included, among others: a workshop at the Asia and Pacific Development Centre in Malaysia on improving population programme effectiveness (organized by the International Council on Management of Population Programmes (ICOMP) and the University of North Carolina); a seminar-cum-training workshop in Nepal for high-level policy makers and programme planners on integrating population factors into development planning; a five-day workshop at the National Institute of Population Studies in Pakistan on demographic and survey data-processing techniques using microcomputers; a seminar on ageing in Singapore (organized jointly by the Singapore Gerontological Society and the Japanese Organization for International Cooperation in Family Planning, Inc. (JOICFP)); and a workshop on the analysis of the 1989 census of Viet Nam for staff members of that country's General Statistical Office.

83. UNFPA also continued to make extensive use of regional advisory teams in support of country programme activities throughout the region. For example, the two-person advisory team based in FAO was active in integrating population education components into rural development activities. The International Labour Organisation (ILO) labour and population advisory team provided technical training for personnel of national planning agencies and line ministries in the application of microcomputer-based techniques to population, human resource and development planning. The ILO regional adviser specializing in women, population and development issues provided technical assistance to countries in highlighting or integrating women's concerns in population planning.

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84. In order to foster self-reliance among regional institutions, UNFPA modified its support to the International Institute for Population Sciences in Bombay, India. As a result, the Institute has been directly administering its fellowship programme since July 1990. Although the population studies programme at the University of the South Pacific was slightly delayed (owing to staff shortages), the University now appears to be on its way to becoming a subregional focal point for providing short-term training for public officials and for developing higher training in population and related activities.

85. In the area of family planning, two regional projects, both executed by ESCAP, are ongoing activities of the regional programme. One study is trying to measure accessibility of different contraceptive methods in rural areas in order to find ways to improve such accessibility and, ultimately, acceptance. Countries participating in this study include China, Indonesia, Pakistan, the Philippines, Sri Lanka, and Viet Nam. The other study is examining the interaction between family planning workers and their clients at the grass-roots level and ways to improve family planning programme effectiveness. The countries participating in this study include Bangladesh, India, Indonesia, Pakistan, the Philippines, the Republic of Korea and Thailand. The findings of the study are expected to enable service providers, programme managers and policy makers to improve programme design and implementation.

86. Under an integrated family planning and health services project, JOICFP provided technical assistance and advisory services to Bangladesh, Indonesia, the Philippines, Papua New Guinea, Samoa, Sri Lanka, Thailand and Tonga. JOICFP also organized a workshop for participants from seven countries and seven international organizations on the development and effective use of educational materials for the integrated project.

87. Among the notable TCDC activities in the region during 1990 were five training workshops held in the Republic of Korea. The workshops provided training to a total of 87 persons from various parts of the region in such areas as family planning programme management, communication skills development, and community participation for women leaders. Other highlights included numerous study tours to Thailand to exchange experience with and learn from the Thai family planning programme, and the visit to China and Thailand of 11 government officials, academics and health personnel from Mongolia for short-term training in IUD insertion, IEC and orientation to the pertinent issues concerning women in development. Similarly, nationals from the Democratic People's Republic of Korea received training at institutes in China in census operations and contraceptive research. In view of the growing attention being accorded adolescent reproductive health care in rapidly modernizing traditional societies, five representatives from the NGO sector and the National Family Planning Co-ordinating Board in Indonesia visited Thailand to study the highly successful UNFPA-supported adolescent programme in that country.

D. Latin America and the Caribbean

88. The year 1990 ended a decade of profound economic crisis for the countries of the Latin American and Caribbean region. The crisis hindered economic and social development and even erased economic gains that had been made throughout the region in previous years. Persistent weaknesses in the public sector compounded these problems, especially in the field of social development. Efforts to fully integrate population programmes into the overall development process continued to encounter difficulties during the year, as most Governments in the region focused their energies on shoring up their economies. In light of the magnitude of the crisis, many countries unfortunately still did not seem to clearly perceive the relevance of healthier population trends to attaining a sturdier socio-economic base.

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89. The continuing crisis has also served to underscore the importance of UNFPA support to the region, most notably in the area of awareness creation to enhance understanding and commitment to population activities. Indeed, activities to clarify the relationship between population factors and sustainable development and to improve the understanding of population activities among the public in general and policy makers and planners in particular were among the most important undertaken by UNFPA in 1990.

90. As part of UNFPA's efforts to develop well-integrated, comprehensive programming, during 1990 the Fund conducted PRSD exercises for Bolivia, the Dominican Republic, Honduras and the English-speaking Caribbean subregion. The exercises were instrumental in developing the comprehensive population programmes that are being submitted to the Council at this session for its consideration and approval. The Fund also began preparations for the first PRSD exercise in Brazil, which was scheduled for early 1991.

91. The MCH/FP sector again received the largest share of programme resources to the region, accounting for 50 per cent of the total volume of funds addressed to country projects. Among the most significant of the Fund's 44 country projects was that in Brazil, which commenced in 1985 and is approaching its final stages. The project emphasizes training in the provision of MCH/FP services, awareness creation through informational and educational activities to secure greater acceptance and utilization of such services, and strengthening of the system's administrative capacity. The recognition of family planning in the new Brazilian Constitution is a significant achievement that has led to requests from various states and municipalities in Brazil for UNFPA support in the setting up of family planning services at the local level. Bolivia also launched a much-reinforced phase of its MCH/FP programme, reflecting the high priority given to improving the health of women and children in the newly adopted National Plan for Child Survival and Development and Maternal Health. The programme seeks to improve the management and provision of services, enhance the technical competence and counselling and communications techniques of service providers, and increase awareness of and demand for reproductive health services. MCH/FP has also been a major activity in the islands of the English-speaking Caribbean sub-region. Activities there have generated increased awareness of reproductive health measures, including awareness of sexually transmitted diseases (STDs) and especially HIV and AIDS, and some improvement in the practice of contraception.

92. During the year, UNFPA continued to place increasing emphasis on women's health in the MCH/FP programmes it supports, partly in response to findings that suggest that past programmes have tended to give comparatively more attention to the health of children. Other important factors influencing the Fund's strong commitment to pursuing the safe motherhood initiative in its programming are the persistence of high rates of maternal mortality and of the high number of illegal abortions, and the fact that other organizations active in the region provide considerable support to children's health care.

93. The Fund has also been concerned with the reproductive health of adolescents. While the majority of UNFPA country-level initiatives in this area took place in the English-speaking Caribbean, Costa Rica and Panama also carried out very successful innovative activities. In Costa Rica, for example, the Social Security Administration provides health-care services to adolescents through its Comprehensive Ambulatory Service, making use of primary health-care assistants for this purpose. The health-care assistants also evaluate adolescents in order to identify those most at risk, referring them to specialized sex education and reproductive health counselling and services. An important part of the project is the formulation and implementation of a national health education plan that is aimed at adolescents, parents and teachers and emphasizes human reproduction. In Panama, the Ministry of Health is seeking to improve women's and adolescents' health through an integrated programme of family planning services, health education and

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community participation. In addition, in Chile, the Faculty of Medicine of the University of Chile initiated a project to develop training services for health personnel, social workers and personnel working in the education field. A primary aim of the project is to implement a research programme in adolescent reproductive health that could serve as the basis for eventually developing a training centre for the region.

94. In the area of population education, there were several important activities in the region in 1990. Projects to introduce population education contents into the curricula of primary and secondary schools were operating in 12 countries (Costa Rica, Colombia, Dominican Republic, Ecuador, El Salvador, Guatemala, Haiti, Honduras, Nicaragua, Panama, Paraguay and Peru). In Honduras, UNFPA support permitted the initiation of work to design a methodology to evaluate the success of population education activities. Teacher training was an important accompanying activity in most projects, and most projects also included activities to extend outreach to those outside the formal school system. UNFPA made arrangements with the Ministry of Education in El Salvador, a country with long experience in incorporating population education in the formal and non-formal sectors, to host a seminar for Central American countries in 1991 to exchange ideas and experiences on improving population education projects and on establishing effective coordination and TCDC arrangements.

95. There were a number of important UNFPA activities in the region in 1990 in the area of demographic analysis and population and development. For example, a number of countries -- Argentina, Bolivia, Costa Rica, Haiti, Mexico and Trinidad and Tobago -- received UNFPA assistance to study and evaluate national population trends for policy and programming purposes. Moreover, teaching and research on population and related topics took place at leading universities and research centres in Brazil, Cuba, Honduras, Mexico and Paraguay. During the year, UNFPA also began an assessment of its support to training in demographic analysis and population and development in order to help it formulate a strategy to guide future programming.

96. Although no longer a major area of UNFPA support in the Latin America and the Caribbean region, the Fund did provide assistance to collect, process and analyse basic demographic data for use in socio-economic development planning. In addition to providing support to a number of countries for training at the United States Bureau of the Census in data processing and analysis and census planning, UNFPA assistance enabled countries such as Bolivia, Guatemala and Nicaragua to complete their national demographic surveys. Bolivia also updated its census cartography and, together with Nicaragua, began preparations for its next full census scheduled for 1991. UNFPA also supported census activities in Brazil, Ecuador, El Salvador, Honduras, Mexico, Panama and Venezuela.

97. In terms of activities directed to special groups, women and youth/adolescents remained the principal targets. UNFPA extended support to six Caribbean countries and territories (Anguilla, Antigua and Barbuda, the British Virgin Islands, Dominica, Jamaica and Montserrat) for such activities as family life education (FLE), family planning and peer counselling. The Fund also provided assistance to Uruguay for activities focusing on the role of youth in population and development programmes and for training in sex education and reproductive health. Brazil held a conference on women's health, and Mexico implemented projects aimed at mainstreaming women into the development process.